



B/IFW

2654
JAH

Docket No.: 4441-0109P
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Kristofer KJORLING et al.

Application No.: 09/987,475

Group Art Unit: 2654

Filed: November 14, 2001

Examiner: V. B. Chawan

For: APPARATUS AND METHOD APPLYING
ADAPTIVE SPECTRAL WHITENING IN A
HIGH-FREQUENCY RECONSTRUCTION
CODING SYSTEM

NOTIFICATION REGARDING SMALL ENTITY STATUS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The issue fee submitted on October 12, 2005 was paid at a Small Entity rate. The issue fee should have been paid at the Large Entity rate.

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

A check for \$700.00 covering the increase to Large Entity for payment of the Issue Fee submitted on October 12, 2005.

Our check in the amount of \$700.00 covering the required fees is enclosed. If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment

Adjustment date: 11/10/2005 MBYEENE2
10/13/2005 MBYEENE2 00000045 09987475
02 FC:2501 -700.00 OP
11/10/2005 MBYEENE2 00000206 09987475
01 FC:1501 1400.00 OP

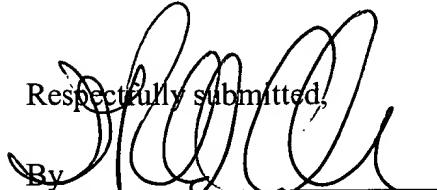
Birch, Stewart, Kolasch & Birch, LLP

TCB/DRA/kmr

or credit any overpayment to our Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. § 1.16 or under § 1.17; particularly, extension of time fees.

Dated: November 9, 2005

Respectfully submitted,

By 
D. Richard Anderson
Reg. No. 40,439

BIRCH, STEWART, KOLASCH & BIRCH, LLP
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Attorney for Applicant

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
Fee Transmittal For FY 2005		Application Number	09/987,475-Conf. #007069
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	November 14, 2001
		First Named Inventor	Kristofer KJORLING
		Examiner Name	V. B. Chawan
		Art Unit	2654
TOTAL AMOUNT OF PAYMENT (\$)		\$700.00	
		Attorney Docket No.	4441-0109P

METHOD OF PAYMENT (check all that apply)					
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments		

Fee Calculation																				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																				
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES															
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>													
	Utility	300	150	500	250	200	100													
	Design	200	100	100	50	130	65													
	Plant	200	100	300	150	160	80													
	Reissue	300	150	500	250	600	300													
Provisional	200	100	0	0	0	0														
2. EXCESS CLAIM FEES																				
Fee Description																				
Each claim over 20 (including Reissues) <u>Fee (\$)</u> <u>Small Entity Fee (\$)</u>																				
Each independent claim over 3 (including Reissues) <u>Fee (\$)</u> <u>Small Entity Fee (\$)</u>																				
Multiple dependent claims <u>Fee (\$)</u> <u>Small Entity Fee (\$)</u>																				
<table border="0"> <tr> <td><u>Total Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> <td colspan="3">Multiple Dependent Claims</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> <td>_____</td> </tr> </table>							<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	Multiple Dependent Claims			_____	_____	_____	_____	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	Multiple Dependent Claims																
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<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	Multiple Dependent Claims																
_____	_____	_____	_____	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____														
3. APPLICATION SIZE FEE																				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																				
<table border="0"> <tr> <td><u>Total Sheets</u></td> <td><u>Extra Sheets</u></td> <td><u>Number of each additional 50 or fraction thereof</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>/50 (round up to a whole number) x</td> <td>_____</td> <td>_____</td> </tr> </table>							<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____	_____	/50 (round up to a whole number) x	_____	_____				
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																
_____	_____	/50 (round up to a whole number) x	_____	_____																
4. OTHER FEE(S)																				
Non-English Specification, \$130 fee (no small entity discount)																				
Other (e.g., late filing surcharge) <u>Increased payment for Large Entity rate of issue fee concurrent with Notification Regarding Small Entity Status</u> <u>\$700.00</u>																				

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent)		Telephone
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Name (Print/Type)	Date November 9, 2005		